

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

ADDRESS (number and street) 1133 SW TOPEKA BLVD.

Check if different than previously reported. (ACC) CC:855 - B3

TOPEKA KS 66629

2. **FEC IDENTIFICATION NUMBER ▼** C00197202 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M M / D D D / Y Y Y Y Y Y in the State of

- (d) 30-Day **POST-Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2015 through M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jason J Droge

Signature of Treasurer Jason J Droge *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y 01 / 25 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="14427.28"/>	<input type="text" value="14427.28"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16739.28"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6402.24"/>	<input type="text" value="12818.24"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="23141.52"/>	<input type="text" value="27245.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4104.00"/>	<input type="text" value="8208.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19037.52"/>	<input type="text" value="19037.52"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5679.05	9629.10
(ii) Unitemized	714.50	3173.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6393.55	12802.10
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6393.55	12802.10
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	8.69	16.14
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	6402.24	12818.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6402.24	12818.24

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	4104.00	8208.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4104.00	8208.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4104.00	8208.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6393.55	12802.10
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6393.55	12802.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

A. Matthew All
Full Name (Last, First, Middle Initial)

Mailing Address 403 Lawrence Ave

City Lawrence State KS Zip Code 66046

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation SVP & General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.4560

Amount of Each Receipt this Period **325.00**

\$25 for 13 pay periods

B. Raymond Ayala
Full Name (Last, First, Middle Initial)

Mailing Address 6314 SW 44th CT

City Topeka State KS Zip Code 66610

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation Chief Technology Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.4562

Amount of Each Receipt this Period **195.00**

\$15 for 13 pay periods

C. Scott Cook
Full Name (Last, First, Middle Initial)

Mailing Address 3601 SE Tomahawk Ct

City Topeka State KS Zip Code 66605

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation Manager Health Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **208.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.4561

Amount of Each Receipt this Period **104.00**

\$8 for 13 pay periods

SUBTOTAL of Receipts This Page (optional)..... **624.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

A. Andrew Corbin
Full Name (Last, First, Middle Initial)

Mailing Address 6337 SW Hodges Road

City Auburn State KS Zip Code 66402

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4563

Amount of Each Receipt this Period
 520.00

\$40 for 13 pay periods

B. Bernardo Cruz
Full Name (Last, First, Middle Initial)

Mailing Address 8417 Shadow Lakes

City Wichita State KS Zip Code 67205

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation Senior Group Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4565

Amount of Each Receipt this Period
 130.00

\$10 for 13 pay periods

C. Paula Daoust
Full Name (Last, First, Middle Initial)

Mailing Address 4501 N. 111th St.

City Kansas City State KS Zip Code 66109

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation Director, Workforce & Leadership

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4566

Amount of Each Receipt this Period
 260.00

\$20 for 13 pay periods

SUBTOTAL of Receipts This Page (optional).....▶	910.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

A. Rusty Doty
Full Name (Last, First, Middle Initial)
Mailing Address 4611 SE Paulen Rd
City Berryton State KS Zip Code 66409
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Director, Sales
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **520.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : SA11AI.4567
Amount of Each Receipt this Period **260.00**
\$20 for 13 pay periods

B. Douglas George
Full Name (Last, First, Middle Initial)
Mailing Address 4417 NW Meadow Crest Rd
City Topeka State KS Zip Code 66618-3457
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Gen Auditor & Corp Compliance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : SA11AI.4571
Amount of Each Receipt this Period **130.00**
\$10 for 13 pay periods

C. Trena Mason
Full Name (Last, First, Middle Initial)
Mailing Address 6112 Blue Nile Drive
City Lawrence State KS Zip Code 66049
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation VP Ext Sales & Marketing
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **650.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : SA11AI.4576
Amount of Each Receipt this Period **325.00**
\$25 for 13 pay periods

SUBTOTAL of Receipts This Page (optional).....	715.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

A. Mischa McHenry
Full Name (Last, First, Middle Initial)
Mailing Address 3314 SE 23rd Terr
City Topeka State KS Zip Code 66605
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Director IS Services
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **650.00**

Date of Receipt 12 / 31 / 2015
Transaction ID : SA11AI.4578
Amount of Each Receipt this Period **325.00**
\$25 for 13 pay periods

B. Suneetra Mickle
Full Name (Last, First, Middle Initial)
Mailing Address 110 Earhart Circle
City Lawrence State KS Zip Code 66049
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Director Government Relations
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **390.00**

Date of Receipt 12 / 31 / 2015
Transaction ID : SA11AI.4580
Amount of Each Receipt this Period **195.00**
\$15 for 13 pay periods

C. Frederick Palenske
Full Name (Last, First, Middle Initial)
Mailing Address 6225 Vorse Rd
City Auburn State KS Zip Code 66402
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Sr VP Prov & Government Affairs
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.10**

Date of Receipt 12 / 31 / 2015
Transaction ID : SA11AI.4582
Amount of Each Receipt this Period **375.05**
\$28.85 for 13 pay periods

SUBTOTAL of Receipts This Page (optional)..... **895.05**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

A. Scott Raymond
Full Name (Last, First, Middle Initial)
Mailing Address 3625 SW Drury Ln
City Topeka State KS Zip Code 66604
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Asst General Counsel/Dir Legal
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2015
Transaction ID : SA11AI.4585
Amount of Each Receipt this Period 195.00
\$15 for 13 pay periods

B. Susan Rowell
Full Name (Last, First, Middle Initial)
Mailing Address 6423 Golf View Dr
City Topeka State KS Zip Code 66614
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Director Marketing Comm & eCom
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2015
Transaction ID : SA11AI.4587
Amount of Each Receipt this Period 130.00
\$10 for 13 pay periods

C. Douglas Scott
Full Name (Last, First, Middle Initial)
Mailing Address 4234 SW Clarion Lakes Dr
City Topeka State KS Zip Code 66610
FEC ID number of contributing federal political committee. **C**
Name of Employer BCBSKS Occupation Director Professional Relation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2015
Transaction ID : SA11AI.4590
Amount of Each Receipt this Period 130.00
\$10 for 13 pay periods

SUBTOTAL of Receipts This Page (optional).....▶ 455.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

A. Ronald Shelton
Full Name (Last, First, Middle Initial)

Mailing Address 3221 NW Hickory Ridge Ln

City Topeka State KS Zip Code 66618

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation Director BCBS Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4591

Amount of Each Receipt this Period
 130.00

\$10 for 13 pay periods

B. Ronald Simmons
Full Name (Last, First, Middle Initial)

Mailing Address 3303 NW Bent Tree Lane

City Topeka State KS Zip Code 66618

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation VP Finance/CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4592

Amount of Each Receipt this Period
 1300.00

\$100 for 13 pay periods

C. Angelene Strecker
Full Name (Last, First, Middle Initial)

Mailing Address 3911 SW Stratford Road

City Topeka State KS Zip Code 66604

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation Dir Inst Relations & Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.4595

Amount of Each Receipt this Period
 195.00

\$15 for 13 pay periods

SUBTOTAL of Receipts This Page (optional).....▶	1625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

A. Scott Vondenkamp
Full Name (Last, First, Middle Initial)

Mailing Address 3413 SW Westport Dr

City Topeka State KS Zip Code 66614

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation Director Application Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.4596

Amount of Each Receipt this Period **195.00**

\$15 for 13 pay periods

B. Robert Young
Full Name (Last, First, Middle Initial)

Mailing Address 7942 SW 33rd

City Topeka State KS Zip Code 66614

FEC ID number of contributing federal political committee. **C**

Name of Employer BCBSKS Occupation VP Admin. Services & Human Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : SA11AI.4599

Amount of Each Receipt this Period **260.00**

\$20 for 13 pay periods

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	455.00
TOTAL This Period (last page this line number only).....▶	5679.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial)

A. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
monthly contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2015

Transaction ID : SB22.4601

Amount of Each Disbursement this Period

684.00

Category/Type

Full Name (Last, First, Middle Initial)

B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
monthly contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2015

Transaction ID : SB22.4602

Amount of Each Disbursement this Period

684.00

Category/Type

Full Name (Last, First, Middle Initial)

C. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
monthly contribution

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2015

Transaction ID : SB22.4603

Amount of Each Disbursement this Period

684.00

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2052.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BLUE CROSS AND BLUE SHIELD OF KANSAS, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial)

A. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
monthly contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2015

Transaction ID : SB22.4604

Amount of Each Disbursement this Period

684.00

Full Name (Last, First, Middle Initial)

B. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
monthly contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2015

Transaction ID : SB22.4605

Amount of Each Disbursement this Period

684.00

Full Name (Last, First, Middle Initial)

C. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
monthly contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2015

Transaction ID : SB22.4606

Amount of Each Disbursement this Period

684.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2052.00

4104.00
